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27256 7590 07/14/2004

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Lisa Butler	(Depositor's name)
[Signature]	(Signature)
10/14/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/065,037	09/12/2002	Timothy J. Havens	GEMS0139PUS	9590

TITLE OF INVENTION: MRI MAGNET VIBRATION INDUCED FIELD INSTABILITY SIMULATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	10/14/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
FETZNER, TIFFANY A	2859	324-309000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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Carl B. Horton

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GE Medical Systems Global Technology Company, LLC Waukesha, WI USA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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10/14/04

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